TB and Malaria Infection

2828. SHRIMATI SHOBHANA BHARTIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether according to the official figure, one Indian dies due to TB every minute, that is, over five lakhs every and over 2.2 million people in the country are infected afresh every year;

(b) if so, whether in the case of malaria also between 1.8 to 2 million cases are occurring every year;

(c) if so, whether there has been a declining share in Central funds for these diseases and also makes it less likely that they can be dealt with expeditiously;

(d) if so, what are the main reasons therefor; and

(e) what steps Government proposed to take to meet this situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) No, Sir. As per the available estimates, deaths due to TB have decreased from over 5,00,000 prior in year 2000 to fewer than 3,70,000 currently, *i.e. 2* deaths due to TB occur every 3 minutes and about 1000 every day.

As per the latest estimate, it is estimated that about 1.8 million new TB cases are occurring afresh every year.

(b) The reported malaria cases by the States in the country since 2003 is indicated below:

Year	Malaria Cases
2003	1869403
2004	1915363
2005	1816342
2006*	1649671

*Provisional

(c) No. Sir, The allocation of funds for Revised National TB Control Programme and National Vector Borne Disease Control Programme during the last three years are as under:

(Rs. In crores)

Year	RNTCP	NVBDCP
2004-05	140.00	269.00
2005-06	186.00	348.00
2006-07	202.17	371.58

(d) Does not arise.

(e) To control vector borne diseases, a comprehensive National Vector Borne Disease Control Programme (NVBDCP) is being implemented in the entire country for prevention and control of Malaria and other vector borne disease namely Filaria, Kala-azar, Japanese Encephalitic (J.E) Dengue and Chikgunya. The Programme is implemented by the States through the existing primary health care system.

Following three pronged strategies are implemented for control of Vector Borne Diseases including malaria:

(i) Disease Management including early case detection and complete treatment strengthening of referral services, epidemic preparedness and rapid response:

(ii) Integrated Vector Management (For Transmission Risk Reduction) including Indoor Residual Spraying in selected high risk areas, use of Insecticide treated bed nets, use of Larvivorous fish, and larval measures in urban areas including bio-larvicides and minor environmental engineering.

(iii) Supportive Interventions including Behaviour Change Communication, Public Private Partnership & Inter Sectoral Convergence, Human Resource Development through capacity building, operational research including studies on drug resistance and insecticide susceptibility, Monitoring and evaluation through periodic reviews/field visits and web based Management Information System.